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PTO/SB/05 (1/98)  
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	2915.3US (96-0149.2)
	First Inventor or Application Identifier	Pai-Hung Pan
	Title	TECHNIQUE FOR ELIMINATION OF FITTING ON SILICON SUBSTRATE DURING GATE STACK ETCH
	Express Mail Label No.	EL638948759US

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 14] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 14]	<b>ACCOMPANYING APPLICATION PARTS</b> 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) <ul style="list-style-type: none"><li>* Small Entity</li></ul> 14. <input type="checkbox"/> Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input checked="" type="checkbox"/> Other: Associate Power of Attorney
4. Oath or Declaration [Total Pages 2] <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul></li></ul>	
5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
17. If a <b>CONTINUING APPLICATION</b> , check appropriate box, and supply the requisite information below and in a preliminary amendment: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: 09 / 073,494 Prior application information: Examiner H. Nguyen Group / Art Unit: 2812	

<b>18. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name	Joseph A. Walkowski Trask Britt				
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Signature		Date	07/12/2000

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# FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ ) 690.00

## Complete if Known

Application Number	Not yet assigned
Filing Date	July 12, 2000
First Named Inventor	Pai-Hung Pan
Examiner Name	Unknown
Group / Art Unit	Unknown
Attorney Docket No.	2915.3US (96-0149.2)

07/12/00  
109/614113  
JCT81 U.S. PTO

<b>METHOD OF PAYMENT</b> (check one)		<b>FEE CALCULATION</b> (continued)	
<b>1.</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit Account Number <u>20-1469</u>  Deposit Account Name <u>Trask Britt</u>  <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17		<b>3. ADDITIONAL FEES</b> Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid	
<b>2.</b> <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		105 130 205 65 Surcharge - late filing fee or oath	
<b>FEE CALCULATION</b>		127 50 227 25 Surcharge - late provisional filing fee or cover sheet.	
<b>1. BASIC FILING FEE</b> Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid		139 130 139 130 Non-English specification	
101 690 201 345 Utility filing fee 690		147 2,520 147 2,520 For filing a request for reexamination	
106 310 206 155 Design filing fee 0		112 920* 112 920* Requesting publication of SIR prior to Examiner action	
107 480 207 240 Plant filing fee 0		113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	
108 690 208 345 Reissue filing fee 0		115 110 215 55 Extension for reply within first month	
114 150 214 75 Provisional filing fee 0		116 380 216 190 Extension for reply within second month	
SUBTOTAL (1) (\$ ) 690.00		117 870 217 435 Extension for reply within third month	
<b>2. EXTRA CLAIM FEES</b>		118 1,360 218 680 Extension for reply within fourth month	
Total Claims <u>18</u> -20** = <u>0</u> X <u>18</u> = <u>0</u>		128 1,850 228 925 Extension for reply within fifth month	
Independent Claims <u>3</u> -3** = <u>0</u> X <u>78</u> = <u>0</u>		119 300 219 150 Notice of Appeal	
Multiple Dependent <u>0</u> = <u>0</u>		120 300 220 150 Filing a brief in support of an appeal	
**or number previously paid, if greater; For Reissues, see below		121 260 221 130 Request for oral hearing	
Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid		138 1,510 138 1,510 Petition to institute a public use proceeding	
103 18 203 9 Claims in excess of 20		140 110 240 55 Petition to revive - unavoidable	
102 78 202 39 Independent claims in excess of 3		141 1,210 241 605 Petition to revive - unintentional	
104 260 204 130 Multiple dependent claim, if not paid		142 1,210 242 605 Utility issue fee (or reissue)	
109 78 209 39 ** Reissue independent claims over original patent		143 430 243 215 Design issue fee	
110 18 210 9 ** Reissue claims in excess of 20 and over original patent		144 580 244 290 Plant issue fee	
SUBTOTAL (2) (\$ ) - 0 -		122 130 122 130 Petitions to the Commissioner	
		123 50 123 50 Petitions related to provisional applications	
		126 240 126 240 Submission of Information Disclosure Stmt	
		581 40 581 40 Recording each patent assignment per property (times number of properties)	
		146 690 246 345 Filing a submission after final rejection (37 CFR § 1.129(a))	
		149 690 249 345 For each additional invention to be examined (37 CFR § 1.129(b))	
		Other fee (specify) _____	
		Other fee (specify) _____	
		* Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) (\$ ) - 0 -	

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	Devin R. Jensen	Registration No. (Attorney/Agent)	44,805
Signature	<i>Devin R. Jensen</i>	Telephone	(801) 532-1922
		Date	07/12/2000

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